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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/710,718	
	Filing Date	07/29/2004	
	First Named Inventor	Crawford	
	Art Unit	3641	
	Examiner Name		
Total Number of Pages in This Submission	4	Attorney Docket Number	JRC.US.1

**ENCLOSURES** (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): ADS, postcard.
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Phillip E. Decker
Signature	
Date	09/16/2004

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Phillip E. Decker	
Signature		Date 09/16/2004

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Attorney's Docket No. JRC.US.1

**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:	John Crawford	]	
Serial No.:	10/710,718	]	Examiner: unknown
Confirmation No.:	4717	]	Group Art Unit: 3641
Filed:	07/29/2004	]	
For:	RIFLE FOREARM ASSIST BRACE	]	

**Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

**AMENDMENT TO CLAIM PRIORITY  
MPEP 201.11**

The Applicant hereby amends the above-captioned application to claim priority to a previously filed provisional application, 60/492,249, filed 08/04/2003. Applicant herewith files a supplemental Application Data Sheet with the proper priority claim. Applicant respectfully requests a corrected Filing Receipt showing the priority claim.

Respectfully submitted,

Date: September 15, 2004  
Tel. No.: 603/766-1910

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